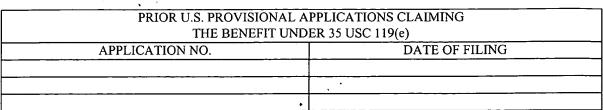


COMBINED DECLARATION AND POWER OF ATTORNEY

As below named inventor	or, I hereby declare that					
national sta	design supplemental	in-part				
first, and sole inventor (e address, and citizenship are as s if only one name is listed below) o ect matter which is claimed and fo	or an original, first, and join	nt inve	entor (if pa	lural r	names are
:	Simulator Device for Human Fe	eminine Mammary Gland	l			
was f applic was f was f was f was f was an	ched hereto. iled on as Serial No. cable).	CT International Applicat(ontents of the above-identif	wn ye ion No	t, and wa	as am R00/0	ended on
	y to disclose information which, Code of Federal Regulations, §		inatio	n of this	appli	ication in
patent or inventor's certithe United States of Aminventor's certificate or a	priority benefits under Title 35, Unficate or of any PCT international nerica listed below and have also any PCT international application by me on the same subject matter.	l application(s) designating identified below any fore n(s) designating at least one	at lea ign ap coun	st one couplication(try other	untry of (s) for than th	other than patent or he United
COUNTRY	APPLICATION	DATE OF FILING (day,month,year)		RIORITY NDER 3		
Brazil	PI 9906054-0	29 December 1999	х	YES		NO
		. 8		YES		NO
				YES		NO

I hereby claim the benefit pursuant to Title 35, United States Code, § 119(e) of the following United States provisional application(s):

	$\sqrt{2}$
. ^	7,230 4



I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL AFPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120							
U.S. APPLICATIONS				Status (check one)			
U.S. APPLICATION	S	U.S	. FILING DATE	PATENTED PENDING ABANDONED			
1.0/							
2.0/							
3.0/							
PCT APPLICATI	ONS D	ESIGNATI	ING THE U.S.	Status (check one)			
PCT APPLICATION No.		FILING DATE	U.S. SERIAL NOS. ASSIGNED (if any)	PATENTED	PENDING	ABANDONED	
4.							
5.							
6.							

DETAILS OF FOREIGN APPLICATIONS FROM WHICH PRIORITY CLAIMED UNDER 35 USC 119 FOR ABOVE LISTED U.S./PCT APPLICATIONS				
ABOVE APPLN. NO.	Country	APPLICATION NO.	DATE OF FILING (day,month,yr)	DATE OF ISSUE (day,month,yr)
1.				
2.				
3.				,
4.				
5.				
6.				

As a named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Song Zhu, Reg. <u>44,420</u> J. John Shimazaki, Reg. <u>37,236</u> Douglas A. Mullen, Reg. 38,569 Richard A. Jones, Reg. No. 39,242



I further direct that correspondence concerning this application be directed to DICKINSON WRIGHT PLLC, 1901 LSt., NW, Suite 800, Washington, D.C. 20036-3506, Telephone (202) 457-0160.

I hereby declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

100

Full name of sole or first inventor:

Inventor's signature

Country of Citizenship: BRAZIL

Residence:

Date

Belo Horizonte, BRAZIL

Post Office Address:

Avenida do Contorno, 2646/404

Sta. Efigenia, CEP-30110-080

Belo Horizonte, BRAZIL

DC 99999-200 71760